



Linda McCulloch, Superintendent  
Office of Public Instruction  
PO Box 202501  
Helena, MT 59620-2501

**School District Claim for  
State Reimbursement for  
Individual and Isolated Transportation**

State ☐  
District ☐  
County ☐

<b>DUE DATES:</b>	<b>First Semester</b>	<b>Second Semester</b>
	February 1 to County Superintendent February 15 to State Superintendent	May 10 to County Superintendent May 24 to State Superintendent
<b>COMPLETE THIS CLAIM FOR STATE REIMBURSEMENT FOR INDIVIDUAL AND ISOLATED TRANSPORTATION:</b>		

This claim is for the period beginning \_\_\_\_\_, 20\_\_\_\_ and ending \_\_\_\_\_, 20\_\_\_\_.  
month day month day

**CERTIFICATION:**

The information on this form is complete and accurate to the best of my knowledge.

Date		Signature, Chair, Board of Trustees			
County:		District:		District Level:	
02 Big Horn		0021 Pryor Elem		Elementary	
District #	Contract #	Shared	Family's Name	Daily Rate	# of Days Transported
2	1063	No	Buffalo, Iris J	0.00	



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Date			Signature, Chair, Board of Trustees			
County: <b>02 Big Horn</b>			District: <b>0022 Community Elem</b>		District Level: <b>Elementary</b>	
District #	Contract #	Shared	Family's Name		Daily Rate	# of Days Transported
16	2491	No	Murphy, LeeAnn		6.00	



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Date			Signature, Chair, Board of Trustees		
County: <b>02 Big Horn</b>			District: <b>0023 Hardin Elem</b>		District Level: <b>Elementary</b>
District #	Contract #	Shared	Family's Name	Daily Rate	# of Days Transported
17-H	1062	Yes	Pretty On Top, Thomas	0.63	_____
17-H	1064	No	Pretty On Top, Veronica	1.25	_____
17-H	1066	No	Pretty On Top, Kathryn	1.25	_____
17-H	1067	No	Pretty On Top, Sr., Norman & Donna	1.25	_____
17-H	1069	Yes	Hammond, Delora	2.63	_____
17-H	1070	No	Walborn, Karmae	5.25	_____
17-H	1071	No	Edwards, Candice	1.50	_____
17-H	1498	No	Swindell, Jennifer	1.00	_____
17-H	2383	No	Big Man, Luzenia Y	1.75	_____
17-H	2384	No	Sypherd, Jennifer	2.00	_____
17-H	2385	Yes	Stewart, Henrietta	1.00	_____



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Date			Signature, Chair, Board of Trustees		
County: <b>02 Big Horn</b>			District: <b>1189 Hardin H S</b>		District Level: <b>High School</b>
District #	Contract #	Shared	Family's Name	Daily Rate	# of Days Transported
1	1062	Yes	Pretty On Top, Thomas	0.62	_____
1	1065	No	Oliver, Peggy	3.75	_____
1	1068	No	He Does It, William (Marty)	9.25	_____
1	1069	Yes	Hammond, Delora	2.62	_____
1	1239	No	He Does It, Vera Jane	5.00	_____
1	2385	Yes	Stewart, Henrietta	1.00	_____